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|------------------------------------|---|--------------|------------|
| <b>RESPONSE TRANSMITTAL LETTER</b> |   | Docket No.:  | Sl         |
| Serial No.:                        | 08/940,686  | Filing Date: | Septem.    |
| Group Art Unit:                    | 1741  | Examiner:    | Leader, W. |
| Applicant(s):                      | Ritzdorf et al.   |              |            |
| Invention:                         | Semiconductor Plating System Workpiece Support Having Workpiece Eng with Pre-Conditioned Contact Face |              |            |

COMMISSIONER FOR PATENTS  
WASHINGTON, D.C. 20231

Sir:

Transmitted herewith is an **Amendment A** in the above-identified application.

- ☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established in statement previously submitted.
- ☐ A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- ☒ A Petition for a **Two-Month** extension of time and the separate fee therefor is enclosed.
- ☒ No additional claim filing fee is required.

The fee has been calculated as shown below.

| CLAIMS REMAINING AFTER AMENDMENT  | HIGHEST NO. PREVIOUSLY PAID FOR | PRESENT EXTRA | SMALL ENTITY |            | LARGE ENTITY |            |
|---|---------------------------------|---------------|--------------|------------|--------------|------------|
|   |                                 |               | RATE         | ADDIT. FEE | RATE         | ADDIT. FEE |
| TOTAL   | MINUS - 20                      | =0            | x \$ 9.00 =  | \$         | x \$ 18.00 = | \$         |
| INDEPENDENT   | MINUS - 3                       | =0            | x \$ 39.00 = | \$         | x \$ 78.00 = | \$         |
| <input type="checkbox"/> First presentation of multiple dependent claim |                                 |               | + \$130.00 = | \$         | + \$260.00 = | \$         |
| Total Fee   |                                 |               |              | \$         |              | \$         |

- ☐ Please charge Deposit Account No. 04-1644 in the amount of \$\_\_\_\_\_ to cover the claim filing fee.
- ☐ A check in the amount of \$\_\_\_\_\_ to cover the claim filing fee is enclosed.
- ☐ **Conditional Petition For Extension of Time:** An extension of time, if necessary, is requested to provide for timely filing of this communication.
- ☐ A duplicate copy of this transmittal sheet is enclosed.
- ☒ Other: **Check in the amount of \$380 for two month extension of time; return receipt postcard.**
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required in connection with this communication or credit any overpayment to Deposit Account No. 04-1644.

Date: July 24, 2000

By Lawrence J. Chapa  
Lawrence J. Chapa, Reg. No. 39,135

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CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as Express Mail No. EL485580729US in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on July 24, 2000.

By Denise Allen